

Certificate of Service

I Tanya Beserra (Name) mailed or delivered a copy of the foregoing on 7/10/06 (Date-mm/dd/yy) to the DHS

(U.S. Immigration and Customs Enforcement - ICE) at 550 Kearney St., Ste 1000 SF, CA 94941 (Number and Street, City, State, Zip Code)

X Tanya Beserra

Signature of Attorney or Representative

(Note: Alien may be required to sign Acknowledgement and Consent below.)

The Privacy Act of 1974 requires that if the person being represented is or claims to be a citizen of the United States or an alien lawfully admitted for permanent residence, he/she must sign the portion below.

I HEREBY ACKNOWLEDGE THAT THE ABOVE-NAMED ATTORNEY OR REPRESENTATIVE REPRESENTS ME IN THESE PROCEEDINGS AND I CONSENT TO THE DISCLOSURE TO HIM/HER OF ANY RECORDS PERTAINING TO ME WHICH APPEAR IN ANY EOIR SYSTEM OF RECORDS.

NAME OF PERSON CONSENTING

ANA B BIOCINI

SIGNATURE OF PERSON CONSENTING

X Ana B Biocini

DATE (mm/dd/yy)

7-14-2006

APPEARANCES - An appearance shall be filed on a Form EOIR-27 by the attorney or representative appearing in each appeal or motion to reopen or motion to reconsider before the Board of Immigration Appeals (see 8 C.F.R. § 1003.38(g)), even though the attorney or representative may have appeared in the case before the Immigration Judge or the U.S. Citizenship and Immigration Services. When an appearance is made by a person acting in a representative capacity, his/her personal appearance or signature constitutes a representation that, under the provisions of 8 C.F.R. part 1003, he/she is authorized and qualified to represent individuals. Thereafter, substitution or withdrawal may be permitted upon the approval of the Board of a request by the attorney or representative of record in accordance with *Matter of Rosales*, 19 I&N Dec. 655 (1988). Please note that appearances for limited purposes are not permitted. See *Matter of Velasquez*, 19 I&N Dec. 377, 384 (BIA 1986). Further proof of authority to act in a representative capacity may be required.

REPRESENTATION - A person entitled to representation may be represented by any of the following:

- (1) Attorneys in the United States as defined in 8 C.F.R. § 1001.1(f).
- (2) Law students and law graduates not yet admitted to the bar as defined in 8 C.F.R. § 1292.1(a)(2).
- (3) Reputable individuals as defined in 8 C.F.R. § 1292.1(a)(3).
- (4) Accredited representatives as defined in 8 C.F.R. § 1292.1(a)(4).
- (5) Accredited officials as defined in 8 C.F.R. § 1292.1(a)(5).

ADDITIONAL INFORMATION:

Tanya Beserra is a law student at U.C. Davis working under the supervision of Holly Cooper, attorney at law.

(Please attach additional sheets of paper if necessary.)

NOTE: THIS FORM MAY NOT BE USED TO REQUEST RECORDS UNDER THE FREEDOM OF INFORMATION ACT OR THE PRIVACY ACT. THE MANNER OF REQUESTING SUCH RECORDS IS CONTAINED IN 28 C.F.R. §§ 16.1-16.11 AND APPENDICES.

Under the Paperwork Reduction Act, a person is not required to respond to a collection of information unless it displays a valid OMB control number. We try to create forms and instructions that are accurate, can be easily understood, and which impose the least possible burden on you to provide us with information. The estimated average time to complete this form is six (6) minutes. If you have comments regarding the accuracy of this estimate, or suggestions for making this form simpler, you can write to the Executive Office for Immigration Review, Office of General Counsel, 5107 Leesburg Pike, Suite 2600, Falls Church, Virginia 22041.

U.S. Department of Justice
Executive Office for Immigration Review
Board of Immigration Appeals

OMB#1125-0005

Notice of Entry of Appearance as Attorney or Representative Before the Board of Immigration Appeals

I hereby enter my appearance as attorney or representative for, and at the request of, the following named person(s):

NAME: Ana B Biocini
(First) (Middle Initial) (Last)

ADDRESS: 50 # 1709304
17695 Ind. Farm Rd
(Number and Street) (Apt. No.)

Bakersfield, CA 93308
(City) (State) (Zip Code)

DATE (mm/dd/yy): 7/10/06

ALIEN NUMBER(S) (List lead alien number and all family member alien numbers, if applicable.)

A-091-182-
333.

Please check one of the following:

- ☒ 1. I am a member in good standing of the bar of the highest court(s) of the following state(s), possession(s), territory(ies), commonwealth(s), or the District of Columbia:

Full Name of Court

California Supreme Ct.

(Please use space on reverse side to list additional jurisdictions.)

I ☒ am not (or ☐ am - explain fully on reverse side) subject to any order of an administrative agency disbaring, suspending, enjoining, restraining, or otherwise restricting me in the practice of law and the courts listed above comprise all of the jurisdictions (other than federal courts) where I am licensed to practice law.

- ☐ 2. I am an accredited representative of the following qualified non-profit religious, charitable, social service, or similar organization established in the United States, so recognized by the Executive Office for Immigration Review pursuant to 8 C.F.R. § 1292.2 (provide name of organization):

- ☐ 3. I am a law student or law graduate, reputable individual, accredited official, or other person authorized to represent individuals pursuant to 8 C.F.R. § 1292.1 (explain fully on reverse side).

I have read and understand the statements provided on the reverse side of this form that set forth the regulations and conditions governing appearances and representation before the Board of Immigration Appeals. I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

SIGNATURE OF ATTORNEY OR REPRESENTATIVE

EOIR ID#

PHONE NUMBER (with area code)

DATE (mm/dd/yy)

X

530-754-4833

7/10/06

NAME OF ATTORNEY OR REPRESENTATIVE (type or print)

ADDRESS

☐ Check here if new address

Holly Cooper, Esq.

U.C. Davis Immigration Clinic
One Shields Ave., TB-30
Davis, CA 95616.

Certificate of Service

I, Helen Cooper (Name) mailed or delivered a copy of the foregoing on 7/10/06 (Date-mm/dd/yy) to the DHS

(U.S. Immigration and Customs Enforcement - ICE) at 550 Kearney St., Ste. 1000 SF CA 94941
(Number and Street, City, State, Zip Code)

X 

Signature of Attorney or Representative

(Note: Alien may be required to sign Acknowledgement and Consent below.)

The Privacy Act of 1974 requires that if the person being represented is or claims to be a citizen of the United States or an alien lawfully admitted for permanent residence, he/she must sign the portion below.

I HEREBY ACKNOWLEDGE THAT THE ABOVE-NAMED ATTORNEY OR REPRESENTATIVE REPRESENTS ME IN THESE PROCEEDINGS AND I CONSENT TO THE DISCLOSURE TO HIM/HER OF ANY RECORDS PERTAINING TO ME WHICH APPEAR IN ANY EOIR SYSTEM OF RECORDS.

NAME OF PERSON CONSENTING

ANA B. BIOCINI

SIGNATURE OF PERSON CONSENTING

X Ana B Biocini

DATE (mm/dd/yy)

7-14-2006

APPEARANCES - An appearance shall be filed on a Form EOIR-27 by the attorney or representative appearing in each appeal or motion to reopen or motion to reconsider before the Board of Immigration Appeals (see 8 C.F.R. § 1003.38(g)), even though the attorney or representative may have appeared in the case before the Immigration Judge or the U.S. Citizenship and Immigration Services. When an appearance is made by a person acting in a representative capacity, his/her personal appearance or signature constitutes a representation that, under the provisions of 8 C.F.R. part 1003, he/she is authorized and qualified to represent individuals. Thereafter, substitution or withdrawal may be permitted upon the approval of the Board of a request by the attorney or representative of record in accordance with *Matter of Rosales*, 19 I&N Dec. 655 (1988). Please note that appearances for limited purposes are not permitted. See *Matter of Velasquez*, 19 I&N Dec. 377, 384 (BIA 1986). Further proof of authority to act in a representative capacity may be required.

REPRESENTATION - A person entitled to representation may be represented by any of the following:

- (1) Attorneys in the United States as defined in 8 C.F.R. § 1001.1(f).
- (2) Law students and law graduates not yet admitted to the bar as defined in 8 C.F.R. § 1292.1(a)(2).
- (3) Reputable individuals as defined in 8 C.F.R. § 1292.1(a)(3).
- (4) Accredited representatives as defined in 8 C.F.R. § 1292.1(a)(4).
- (5) Accredited officials as defined in 8 C.F.R. § 1292.1(a)(5).

ADDITIONAL INFORMATION:

(Please attach additional sheets of paper if necessary.)

NOTE: THIS FORM MAY NOT BE USED TO REQUEST RECORDS UNDER THE FREEDOM OF INFORMATION ACT OR THE PRIVACY ACT. THE MANNER OF REQUESTING SUCH RECORDS IS CONTAINED IN 28 C.F.R. §§ 16.1-16.11 AND APPENDICES.

Under the Paperwork Reduction Act, a person is not required to respond to a collection of information unless it displays a valid OMB control number. We try to create forms and instructions that are accurate, can be easily understood, and which impose the least possible burden on you to provide us with information. The estimated average time to complete this form is six (6) minutes. If you have comments regarding the accuracy of this estimate, or suggestions for making this form simpler, you can write to the Executive Office for Immigration Review, Office of General Counsel, 5107 Leesburg Pike, Suite 2600, Falls Church, Virginia 22041.



U.S. Department of Justice

Executive Office for Immigration Review

***Board of Immigration Appeals
Office of the Clerk***

*5107 Leesburg Pike, Suite 2000
Falls Church, Virginia 22041*

**Christopher J. Todd
1 Shields Avenue, TB-30
Davis, CA 95616**

**Office of the District Counsel/SFR
P.O. Box 26449
San Francisco, CA 94126-6449**

Name: *F-BIOCINI, ANA BEATRIZ

A91-182-333

Type of Proceeding: Removal

Date of this notice: 07/06/2006

Type of Appeal: Appeal of IJ MTR

Appeal filed by: Allen

Date of Appeal: 06/07/2006

NOTICE -- BRIEFING SCHEDULE

- o Appealing party is granted until 07/27/2006 to submit a brief to the Board of Immigration Appeals. The brief must be **RECEIVED** at the Board on or before this date.
- o Opposing party is granted until 07/27/2006 to submit a reply brief to the Board of Immigration Appeals. The brief must be **RECEIVED** at the Board on or before this date.

WARNING: If you indicated on the Notice of Appeal (Form EOIR-26) that you will file a brief or statement, you are expected to file a brief or statement in support of your appeal. If you fail to file the brief or statement within the time set for filing in this briefing schedule, the Board may summarily dismiss your appeal. See 8 C.F.R. § 1003.1(d)(2)(i)(E).

FILING INSTRUCTIONS -- In General.

IMPORTANT: The Board of Immigration Appeals has included two copies of this notice. Please attach one copy of this notice to the front of your brief when you mail or deliver it to the Board, and keep one for records. Thank you for your cooperation.

A fee is not required for the filing of a brief. Your brief must be **RECEIVED** at the Clerk's Office at the Board of Immigration Appeals within the prescribed time limits. It is **NOT** sufficient simply to mail the brief and assume your brief will arrive on time. We strongly urge the use of an overnight courier service to ensure the timely filing of your brief.

Use of an over-night courier service is strongly encouraged to ensure timely filing.

91-182-333

If the alien is represented by counsel at the appeal level, a Notice of Entry of Appearance as Attorney or Representative before the Board of Immigration Appeals (Form EOIR-27) must be filed with the Board.

If you have any questions about how to file something at the Board, you should review the Board's Practice Manual and Questions and Answers at www.usdoj.gov/eoir.

Proof of service on the opposing party at the address above is required for ALL submissions to the Board of Immigration Appeals -- including correspondence, forms, briefs, motions, and other documents. If you are the Respondent or Applicant, the "Opposing Party" is the District Counsel for the DHS at the address shown above. Your certificate of service must clearly identify the document sent to the opposing party, the opposing party's name and address, and the date it was sent to them. Any submission filed with the Board without a certificate of service on the opposing party will be rejected.

Filing Address:

To send by courier or overnight delivery service, or to deliver in person:

Board of Immigration Appeals,
Clerk's Office,
5107 Leesburg Pike, Suite 2000,
Falls Church, VA 22041

Business hours: Monday through Friday, 8:00 a.m. to 4:30 p.m.

To mail by regular first class mail:

Board of Immigration Appeals
Clerk's Office
P.O. Box 8530
Falls Church, VA 22041.

FILING INSTRUCTIONS -- Extension Request.

Unless you receive a Board Notice granting your extension request, your brief will remain due on the date stated above.

Extensions of briefing time will only be granted for good cause. All extension requests must be in writing. Telephonic or fax requests will not be accepted.

Extension requests must be **RECEIVED** at the Board on or before the expiration of the initial briefing schedule. Requests for extension of briefing time received after expiration of the initial briefing period, will not be granted.

The Board does not grant extensions for more than 21 days. If your request is granted, the brief will generally be due 21 days from the date the initial briefing schedule expires, not 21 days from the date of the request for an extension or the date of the Board response to the request. The new due date will be stated on the notice granting the extension.

The policy of the Board is that no additional extensions will be granted.



U.S. Department of Justice

Executive Office for Immigration Review

*Board of Immigration Appeals
Office of the Clerk*

5107 Leesburg Pike, Suite 2000
Falls Church, Virginia 22041

Christopher J. Todd
1 Shields Avenue, TB-30
Davis, CA 95616

Office of the District Counsel/SFR
P.O. Box 26449
San Francisco, CA 94126-6449

Name: *F-BIOCINI, ANA BEATRIZ

A91-182-333

Type of Proceeding: Removal

Date of this notice: 06/08/2006

Type of Appeal: Appeal of IJ MTR

Filed by: Alien

FILING RECEIPT FOR APPEAL

The Board of Immigration Appeals acknowledges receipt of your appeal and fee or fee waiver request (where applicable) on 06/07/2006 in the above-referenced case.

PLEASE NOTE:

In all future correspondence or filings with the Board, please list the name and alien registration number ("A" number) of the case (as indicated above), as well as all of the names and "A" numbers for every family member who is included in this appeal.

If you have any questions about how to file something at the Board, you should review the Board's Practice Manual and Questions and Answers at www.usdoj.gov/eoir.

Proof of service on the opposing party at the address above is required for ALL submissions to the Board of Immigration Appeals -- including correspondence, forms, briefs, motions, and other documents. If you are the Respondent or Applicant, the "Opposing Party" is the District Counsel for the DHS at the address shown above. Your certificate of service must clearly identify the document sent to the opposing party, the opposing party's name and address, and the date it was sent to them. Any submission filed with the Board without a certificate of service on the opposing party will be rejected.

WARNING: If you leave the United States after filing this appeal but before the Board issues a decision, your appeal will be considered withdrawn and the Immigration Judge's decision will become final as if no appeal had been taken (unless you are an "arriving alien" as defined in the regulations under 8 C.F.R. section 1001.1(q)).

YAL:MS

U.S. Department of Justice
Executive Office for Immigration Review
Board of Immigration Appeals

OMB# 1125-0002

Notice of Appeal from a Decision of an
Immigration Judge

Staple Check or Money Order Here. Include Name(s) and "A" Number(s) on the face of the check or money order.

1. List Name(s) and "A" Number(s) of all Respondent(s)/Applicant(s):

ANA B. BIOCINI
A# 91182 333

For Official Use Only

! **WARNING:** Names and "A" Numbers of everyone appealing the Immigration Judge's decision must be written in item #1.

2. I am ☒ the Respondent/Applicant ☐ DHS-ICE (Mark only one box.)

3. I am ☒ DETAINED ☐ NOT DETAINED (Mark only one box.)

4. My last hearing was at SF, CA (Location, City, State)

5. What decision are you appealing?

Mark only one box below. If you want to appeal more than one decision, you must use more than one Notice of Appeal (Form EOIR-26).

- ☐ I am filing an appeal from the Immigration Judge's decision in *merits proceedings* (example: removal, deportation, exclusion, asylum, etc.) dated _____.
- ☐ I am filing an appeal from the Immigration Judge's decision in *bond proceedings* dated _____. (For DHS use only: Did DHS invoke the automatic stay provision before the Immigration Court? ☐ Yes. ☐ No.)
- ☒ I am filing an appeal from the Immigration Judge's decision *denying a motion to reopen or a motion to reconsider* dated MAY 9, 2006 (attached)
- (Please attach a copy of the Immigration Judge's decision that you are appealing.)

Form EOIR-26
Revised Dec. 2005

6. State in detail the reason(s) for this appeal. Please refer to the General Instructions at item F for further guidance. You are not limited to the space provided below; use more sheets of paper if necessary. Write your name(s) and "A" number(s) on every sheet.

I. The IJ abused his discretion in denying the Respondent's motion to reconsider. He made errors of fact, and incorrectly applied the CAT standard to the facts of this case.

(Attach additional sheets if necessary)

WARNING: You must clearly explain the specific facts and law on which you base your appeal of the Immigration Judge's decision. The Board may summarily dismiss your appeal if it cannot tell from this Notice of Appeal, or any statements attached to this Notice of Appeal, why you are appealing.

7. Do you desire oral argument before the Board of Immigration Appeals? ☐ Yes ☒ No
8. Do you intend to file a separate written brief or statement after filing this Notice of Appeal? ☒ Yes ☐ No

WARNING: If you mark "Yes" in item #8, you will be expected to file a written brief or statement after you receive a briefing schedule from the Board. The Board may summarily dismiss your appeal if you do not file a brief or statement within the time set in the briefing schedule.

9.



X

Signature of Person Appealing
(or attorney or representative)

6/6/06

Date

10.

Mailing Address of Respondent(s)/Applicant(s)

ANA BLOOM
(Name)

ICE Custody - Yuba County Jail
(Street Address)

(Apartment or Room Number)

(City, State, Zip Code)

(Telephone Number)

11.

Mailing Address of Attorney or Representative for the Respondent(s)/Applicant(s)

Christopher Todd / James Smith
(Name)

1 Shields Ave. TB-30
(Street Address)

UC DAVIS IMMIGRATION LAW CLINIC
(Suite or Room Number)

DAVIS, CA 95616
(City, State, Zip Code)

(530) 752-6942
(Telephone Number)

NOTE: You must notify the Board within five (5) working days if you move to a new address. You must use an alien's Change of Address Form (Form EOIR-33/BIA).

NOTE: If an attorney or representative signs this appeal for you, he or she must file with this appeal, a Notice of Entry of Appearance as Attorney or Representative Before the Board of Immigration Appeals (Form EOIR-27).

12.

PROOF OF SERVICE
(You Must Complete This)

I C Todd (Name) mailed or delivered a copy of this Notice of Appeal
on 6/6/06 (Date) to ICE Ofc. of Chief Counsel (Opposing Party)
at 550 Kearny St., Ste 1000, SF CA (Number and Street, City, State, Zip Code)



X

Signature

NOTE: If you are the Respondent or Applicant, the "Opposing Party" is the Assistant Chief Counsel of DHS-ICE.

WARNING: If you do not complete this section properly, your appeal will be rejected or dismissed.

WARNING: If you do not attach the fee or a completed Fee Waiver Request (Form EOIR-26A) to this appeal, your appeal will be rejected or dismissed.

- ☐ Read all of the General Instructions
☐ Provided all of the requested information
☐ Completed this form in English
☐ Provided a certified English translation for all non-English attachments

HAVE YOU?

- ☐ Signed the form
☐ Served a copy of this form and all attachments on the opposing party
☐ Completed and signed the Proof of Service
☐ Attached the required fee or Fee Waiver Request

U.S. Department of Justice
Executive Office for Immigration Review
Board of Immigration Appeals

OMB# 1125-0003

Fee Waiver Request

ANA B. BIOCINI

Name: _____

91 182 333

Alien Number ("A" Number): _____

If more than one alien is included in your appeal or motion, only the lead alien need file this form.

I, ANA BIOCINI, declare under penalty of perjury, pursuant to 28 U.S.C. section 1746, that I am the person above and that I am unable to pay the fee. I believe that my appeal/motion is valid, and I declare that the following information is true and correct to the best of my knowledge:

Assets

Wages, Salary \$ 0 /month

Other Income 0 /month
(business, profession,
(self-employed, rent
payments, interest, etc.)

Cash 0

Checking or Savings Account \$ 200 -

Property 0
(real estate, automobile,
stocks, bonds, etc.)

Other Financial Support 0 /month
(public assistance, alimony,
child support, gift, parent,
spouse, other family members, etc.)

Expenses (including dependents)

Housing 0 /month
(rent, mortgage, etc.)

Food 0 /month

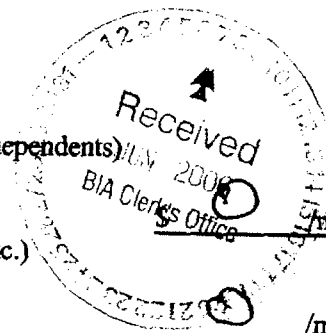
Clothing 0 /month

Utilities 0 /month
(phone, electric, gas,
water, etc.)

Transportation 0 /month

Debts, Liabilities 0 /month

Other 0 /month
(specify)



Under the Paperwork Reduction Act, a person is not required to respond to a collection of information unless it displays a valid OMB control number. We try to create forms and instructions that are accurate, can be easily understood, and which impose the least possible burden on you to provide us with information. The estimated average time to complete this form is one (1) hour. If you have comments regarding the accuracy of this estimate, or suggestions for making this form simpler, you can write to the Executive Office for Immigration Review, Office of the General Counsel, 5107 Leesburg Pike, Suite 2600, Falls Church, Virginia 22041.

Signature

Ana Biocini

Date

6/6/06

U.S. Department of Justice
Executive Office for Immigration Review
Board of Immigration Appeals

OMB#1125-0005

**Notice of Entry of Appearance as Attorney or
Representative Before the Board of
Immigration Appeals**

I hereby enter my appearance as attorney or representative for, and at the request of, the following named person(s):

NAME:

ANNA

(First)

BEATRIZ

(Middle Initial)

BLOCINI

(Last)

ADDRESS:

ICE CUSTODY - Yuba County Jail

(Number and Street)

(Apt. No.)

MARYSVILLE CA

(City)

(State)

(Zip Code)

DATE (mm/dd/yy): 6/6/06

ALIEN NUMBER(S) (List lead alien number and all family member alien numbers, if applicable.)

A91182333

Please check one of the following:

☒ 1.

I am a member in good standing of the bar of the highest court(s) of the following state(s), possession(s), territory(ies), commonwealth(s), or the District of Columbia:

Full Name of Court

CJT - NY

JFS - CA

State Bar No. (if applicable)

(n/a)
41980

(Please use space on reverse side to list additional jurisdictions.)

☒ I am not (or ☐ am - explain fully on reverse side) subject to any order of any court or administrative agency disbaring, suspending, enjoining, restraining, or otherwise restricting me in the practice of law and the courts listed above comprise all of the jurisdictions (other than federal courts) where I am licensed to practice law.

☐ 2.

I am an accredited representative of the following qualified non-profit religious, charitable, social service, or similar organization established in the United States, so recognized by the Executive Office for Immigration Review pursuant to 8 C.F.R. § 1292.2 (provide name of organization):

☐ 3.

I am a law student or law graduate, reputable individual, accredited official, or other person authorized to represent individuals pursuant to 8 C.F.R. § 1292.1 (explain fully on reverse side).

I have read and understand the statements provided on the reverse side of this form that set forth the regulations and conditions governing appearances and representation before the Board of Immigration Appeals. I declare under penalty of perjury under the laws of the United States of America that the foregoing is true and correct.

SIGNATURE OF ATTORNEY OR REPRESENTATIVE

EOIR ID#

PHONE NUMBER (with area code)

DATE (mm/dd/yy)

X

530 752 6942

6/6/06

NAME OF ATTORNEY OR REPRESENTATIVE (type or print)

Christopher Todd / James Smith

ADDRESS

UCD Immigration Law Clinic
1 Shields Ave. TB-30
Davis CA 95616☐ Check here if new address

Certificate of Service	
I, <u>CTODD</u> (Name)	mailed or delivered a copy of the foregoing on <u>6/6/06</u> to the DHS (Date-mm/dd/yy)
(U.S. Immigration and Customs Enforcement - ICE) at <u>SS. Larry St, Ste 1000 SFCA</u> (Number and Street, City, State, Zip Code)	
<input checked="" type="checkbox"/> Signature of Attorney or Representative (Note: Alien may be required to sign Acknowledgement and Consent below.)	

The Privacy Act of 1974 requires that if the person being represented is or claims to be a citizen of the United States or an alien lawfully admitted for permanent residence, he/she must sign the portion below.

I HEREBY ACKNOWLEDGE THAT THE ABOVE-NAMED ATTORNEY OR REPRESENTATIVE REPRESENTS ME IN THESE PROCEEDINGS AND I CONSENT TO THE DISCLOSURE TO HIM/HER OF ANY RECORDS PERTAINING TO ME WHICH APPEAR IN ANY EOIR SYSTEM OF RECORDS.

NAME OF PERSON CONSENTING	SIGNATURE OF PERSON CONSENTING	DATE (mm/dd/yy)
ANA BIOCINI	X Ana BIOCINI	6/1/06

APPEARANCES - An appearance shall be filed on a Form EOIR-27 by the attorney or representative appearing in each appeal or motion to reopen or motion to reconsider before the Board of Immigration Appeals (see 8 C.F.R. § 1003.38(g)), even though the attorney or representative may have appeared in the case before the Immigration Judge or the U.S. Citizenship and Immigration Services. When an appearance is made by a person acting in a representative capacity, his/her personal appearance or signature constitutes a representation that, under the provisions of 8 C.F.R. part 1003, he/she is authorized and qualified to represent individuals. Thereafter, substitution or withdrawal may be permitted upon the approval of the Board of a request by the attorney or representative of record in accordance with *Matter of Rosales*, 19 I&N Dec. 655 (1988). Please note that appearances for limited purposes are not permitted. See *Matter of Velasquez*, 19 I&N Dec. 377, 384 (BIA 1986). Further proof of authority to act in a representative capacity may be required.

REPRESENTATION - A person entitled to representation may be represented by any of the following:

- (1) Attorneys in the United States as defined in 8 C.F.R. § 1001.1(f).
- (2) Law students and law graduates not yet admitted to the bar as defined in 8 C.F.R. § 1292.1(a)(2).
- (3) Reputable individuals as defined in 8 C.F.R. § 1292.1(a)(3).
- (4) Accredited representatives as defined in 8 C.F.R. § 1292.1(a)(4).
- (5) Accredited officials as defined in 8 C.F.R. § 1292.1(a)(5).

ADDITIONAL INFORMATION:

(Please attach additional sheets of paper if necessary.)

NOTE: THIS FORM MAY NOT BE USED TO REQUEST RECORDS UNDER THE FREEDOM OF INFORMATION ACT OR THE PRIVACY ACT. THE MANNER OF REQUESTING SUCH RECORDS IS CONTAINED IN 28 C.F.R. §§ 16.1-16.11 AND APPENDICES.

Under the Paperwork Reduction Act, a person is not required to respond to a collection of information unless it displays a valid OMB control number. We try to create forms and instructions that are accurate, can be easily understood, and which impose the least possible burden on you to provide us with information. The estimated average time to complete this form is six (6) minutes. If you have comments regarding the accuracy of this estimate, or suggestions for making this form simpler, you can write to the Executive Office for Immigration Review, Office of General Counsel, 5107 Leesburg Pike, Suite 2600, Falls Church, Virginia 22041.

UNITED STATES DEPARTMENT OF JUSTICE
EXECUTIVE OFFICE FOR IMMIGRATION REVIEW
IMMIGRATION COURT
SAN FRANCISCO, CALIFORNIA

CHRISTOPHER TODD
IMMIGRATION LAW CLINIC- UC DAVIS SCHOOL OF LAW
ONE SHIELDS AVENUE TB-30
DAVIS CA 95616-8821

IN THE MATTER OF
*F-BIOCINI, ANA BEATRIZ
93061-011

FILE A 91-182-333

DATE: May 9, 2006

___ UNABLE TO FORWARD - NO ADDRESS PROVIDED

X ATTACHED IS A COPY OF THE DECISION OF THE IMMIGRATION JUDGE. THIS DECISION IS FINAL UNLESS AN APPEAL IS FILED WITH THE BOARD OF IMMIGRATION APPEALS WITHIN 30 CALENDAR DAYS OF THE DATE OF THE MAILING OF THIS WRITTEN DECISION. SEE THE ENCLOSED FORMS AND INSTRUCTIONS FOR PROPERLY PREPARING YOUR APPEAL. YOUR NOTICE OF APPEAL, ATTACHED DOCUMENTS, AND FEE OR FEE WAIVER REQUEST MUST BE MAILED TO:
BOARD OF IMMIGRATION APPEALS
OFFICE OF THE CLERK
P.O. BOX 8530
FALLS CHURCH, VA 22041

___ ATTACHED IS A COPY OF THE DECISION OF THE IMMIGRATION JUDGE AS THE RESULT OF YOUR FAILURE TO APPEAR AT YOUR SCHEDULED DEPORTATION OR REMOVAL HEARING. THIS DECISION IS FINAL UNLESS A MOTION TO REOPEN IS FILED IN ACCORDANCE WITH SECTION 242B(c)(3) OF THE IMMIGRATION AND NATIONALITY ACT, 8 U.S.C. SECTION 1252B(c)(3) IN DEPORTATION PROCEEDINGS OR SECTION 240(c)(6), 8 U.S.C. SECTION 1229a(c)(6) IN REMOVAL PROCEEDINGS. IF YOU FILE A MOTION TO REOPEN, YOUR MOTION MUST BE FILED WITH THIS COURT:

IMMIGRATION COURT
550 KEARNY ST., SUITE 800
SAN FRANCISCO, CA 94108

___ OTHER: _____

NMC
COURT CLERK
IMMIGRATION COURT

CC: AGUILAR, JASON B.
550 KEARNY STREET, SUITE 1000
SAN FRANCISCO, CA, 94108

NMC

FF

000973

UNITED STATES DEPARTMENT OF JUSTICE
EXECUTIVE OFFICE FOR IMMIGRATION REVIEW
IMMIGRATION COURT
SAN FRANCISCO, CALIFORNIA

In Re

Ana Biocini

Respondent.

)
)
)
)
)
)
)

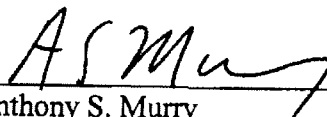
File Number: A 91 182 333

In Removal Proceedings

ORDER

The respondent's motion to reconsider is **DENIED**.

Dated: May 9, 2006



Anthony S. Murry
Immigration Judge

ASM
Chad 3-23-06
v

DETAINED ALIEN

1 CHRISTOPHER TODD, Attorney at Law
2 IMMIGRATION LAW CLINIC
3 University of California, Davis School of Law
4 1 Shields Avenue TB-30
5 Davis, CA 95616-8821
6 Tel.: (530) 752-6942 or
7 (415) 846-9311
8 Fax: (530) 752-0822

9 Attorneys for Respondent
10 ANA BIOCINI

11 Assisted by: Dia Moua, Chad Greeson

**RECEIVED
DEPARTMENT OF JUSTICE**

APR 5 2006

**EXECUTIVE OFFICE
IMMIGRATION REVIEW
IMMIGRATION COURT
SAN FRANCISCO, CALIFORNIA**

12 **UNITED STATES DEPARTMENT OF JUSTICE**
13 **EXECUTIVE OFFICE FOR IMMIGRATION REVIEW**
14 **IMMIGRATION COURT**
15 **SAN FRANCISCO, CALIFORNIA (DUBLIN FCI)**

16 IN THE MATTER OF:

File No. A 091-182-333

17 ANA BIOCINI

**RESPONDENT'S MOTION
TO REISSUE DECISION**

18 Respondent.

19
20 Respondent, through her counsel, hereby moves this court to reissue the March 23, 2006
21 order in this case. Respondent's counsel has not yet received a copy of the court's order. Counsel
22 only became aware of the decision after contact with the Respondent's deportation officer. The
23 order did not contain counsel's complete mailing address, which may explain the fact that the order
24 appears not to have arrived at the UC Davis Immigration Law Clinic.

25 Dated: April 3, 2006

Respectfully submitted,

26
27
28 

CHRISTOPHER TODD
Immigration Law Clinic, UC Davis School of Law
Attorney for the Respondent

DECLARATION OF DIA MOUA

I, Dia Moua, declare:

1. I am a law student with the UC Davis School of Law's Immigration Law Clinic.
2. On March 27, 2006 I contacted Ms. Biocini's deportation officer to check on the current status of her case since her departure from Dublin-FCI. During my conversation, the deportation officer informed me that the court issued a decision of denial regarding Ms. Biocini's request for relief under Convention Against Torture. The order was dated March 23, 2006. He further informed that we have 30 days to file an appeal.
3. I was very surprised by this news since the Immigration Clinic did not receive a copy of the court decision. Therefore, the deportation officer faxed to me a copy at the clinic for my review.

Executed under penalty of perjury on April 3, 2006 in Davis, CA, by

Dia Moua
Student Advocate

1
2 **CERTIFICATE OF SERVICE**

3 On April 3, 2006, I served the following document(s): **RESPONDENT'S MOTION**
4 **TO REISSUE DECISION** upon the parties in said action by placing a true and correct copy in a sealed envelope and each envelope addressed as follows:

5 Honorable Judge Murry
6 Office of the Immigration Judge
7 Executive Office for Immigration Review
8 550 Kearny Street, Suite 800 (8th Floor)
9 San Francisco, CA 94108

10 ☐ *By Facsimile Machine (Fax)* . By personally transmitting a true and correct copy thereof via an
11 electronic facsimile machine during regular business hours.

12 ☒ *By Mail* . I am readily familiar with the business practice for collection and processing of
13 correspondence for mailing with the United States Postal Service and that this document, with
14 postage fully prepaid, will be deposited with the United States Postal Service this date in the ordinary
15 course of business.

16 ☐ *By Certified Mail*. I am readily familiar with the business practice for collection and processing of
17 correspondence for certified mailing with the United States Postal Service and that this document,
18 with postage fully prepaid, will be deposited with the United States Postal Service on this date in the
19 ordinary course of business.

20 ☐ *By Overnight/Express Mail*. I am familiar with the business practice for the collection and processing
21 for Overnight/Express Mail with the United States Postal Service and/or Overnight service provider.
22 Such correspondence will be deposited with a facility regularly maintained by the United States
23 Postal Service for receipt of express mail or other overnight service providers/entities (i.e., Federal
24 Express, United States Parcel Service, etc.) For receipt of Overnight Mail on the same day in the
25 ordinary course of business.

26 ☐ *By Personal Service* . By personally delivering a true copy thereof to the office of the addressee
27 above.

28 I declare under penalty of perjury that the foregoing is true and correct. Executed on April 3, 2006,
in Davis, CA.

Justine Tobin
Justine Tobin
Office Manager
UCD Immigration Law Clinic

**RECEIVED
DEPARTMENT OF JUSTICE**

APR 5 2006

**EXECUTIVE OFFICE
IMMIGRATION REVIEW
IMMIGRATION COURT
SAN FRANCISCO, CALIFORNIA**

UNITED STATES DEPARTMENT OF JUSTICE
EXECUTIVE OFFICE FOR IMMIGRATION REVIEW
IMMIGRATION COURT
SAN FRANCISCO, CALIFORNIA

CHRISTOPHER TODD
IMMIGRATION LAW CLINIC- UC DAVIS SCHOOL OF LAW
ONE SHIELDS AVENUE
DAVIS CA 95616

IN THE MATTER OF
*F-BIOCINI, ANA BEATRIZ
93061-011

FILE A 91-182-333

DATE: Mar 23, 2006

UNABLE TO FORWARD - NO ADDRESS PROVIDED

ATTACHED IS A COPY OF THE DECISION OF THE IMMIGRATION JUDGE. THIS DECISION IS FINAL UNLESS AN APPEAL IS FILED WITH THE BOARD OF IMMIGRATION APPEALS WITHIN 30 CALENDAR DAYS OF THE DATE OF THE MAILING OF THIS WRITTEN DECISION. SEE THE ENCLOSED FORMS AND INSTRUCTIONS FOR PROPERLY PREPARING YOUR APPEAL. YOUR NOTICE OF APPEAL, ATTACHED DOCUMENTS, AND FEE OR FEE WAIVER REQUEST MUST BE MAILED TO:

BOARD OF IMMIGRATION APPEALS
OFFICE OF THE CLERK
P.O. BOX 8530
FALLS CHURCH, VA 22041

ATTACHED IS A COPY OF THE DECISION OF THE IMMIGRATION JUDGE AS THE RESULT OF YOUR FAILURE TO APPEAR AT YOUR SCHEDULED DEPORTATION OR REMOVAL HEARING. THIS DECISION IS FINAL UNLESS A MOTION TO REOPEN IS FILED IN ACCORDANCE WITH SECTION 242B(c)(3) OF THE IMMIGRATION AND NATIONALITY ACT, 8 U.S.C. SECTION 1252B(c)(3) IN DEPORTATION PROCEEDINGS OR SECTION 240(c)(6), 8 U.S.C. SECTION 1229a(c)(6) IN REMOVAL PROCEEDINGS. IF YOU FILE A MOTION TO REOPEN, YOUR MOTION MUST BE FILED WITH THIS COURT:

IMMIGRATION COURT
550 KEARNY ST., SUITE 800
SAN FRANCISCO, CA 94108

OTHER: _____

NMC
COURT CLERK
IMMIGRATION COURT

CC: AGUILAR, JASON B.
550 KEARNY STREET, SUITE 1000
SAN FRANCISCO, CA, 94108

GSR

cc: custody officer

FF

000978

AR 979-85 have been
deleted.

Please see AR 83-89

Ana Biocini
93061-011
FCI Dublin Unit D
5701 8TH Street, Camp Parks
Dublin, CA 94568

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

UNITED STATES OF AMERICA,

Plaintiff-Respondent,

vs

ANA BEATRIZ BIOCINI,

Defendant-Movant.

No. CR-95-0187-01 CRB

MOTION TO CHANGE CAPTION OF
CHARGE.

Comes now Defendant-Movant Ana Beatriz Biocini (Hereinafter, "Biocini") to move this Honorable Court to change the caption of her charge from a felony to a misdemeanor.

The Government and this Court have been most gracious in this case. However, the felony charge against Biocini will result in Biocini's deportation to Columbia whereas a misdemeanor will not.

The attached heretofore copies of a news article in the el Caleño dated July 9, 2004 depicts Biocini's fate if she is deported to Columbia. The man pictured in the news article was the informant in the case at bar. Upon his return to Columbia he was immediately murdered. This is just an example of what can be expected when individuals give information, or consider giving information, to the United States Government in regards to drug activity.

Ana Biocini, as the Court is aware, did "agree to truthfully disclose all information with respect to herself and others concerning matters about which the United States

Ex 4

inquires...and agreed...the defendant shall at all times give complete, truthful and accurate information and testimony."

In exchange for her Biocini's information and cooperation, she received benefits at the time she was sentenced. Correspondence was exchanged between Assistant United States Attorney Barbara Brennan Silano and Biocini's attorney regarding the possibility of the government's application for an "S" Visa for Biocini. On June 17, 2004 Assistant United States Attorney Barbara Brennan Silano stated in her correspondence that she was "not prepared to apply for an "S" Visa for Ms. Biocini" due to the "benefits" Biocini received. However, since the letter was written, extenuating circumstances have occurred which gives rise to believe that Biocini will meet with the same demise as the informant in this case.

Not only is it probable that Ana Biocini will be executed upon her return to Columbia, it is possible that her minor child will also be murdered if he returns to Columbia to be with his mother.


United States Citizens are placed in witness protection programs for the information they give to the government. Even though Biocini is not a United States Citizen, her life is just as valuable as a United States Citizen.

In the alternative to changing Biocini's felony charge to a misdemeanor, Biocini requests that she and her minor child be placed in the witness protection program. It is evident that the gruesome change in events in this case call for reconsideration of the "S" Visa application previously sought.

One would be hard-pressed to object to keeping Ana Biocini and her young son alive and protected from the hostile Colombian Drug Cartel.

Although there is no case law to cite on this matter, this matter should be considered pursuant to the moral character of this Country which was founded on Christian principles and Godly behavior.

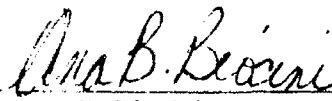
Respectfully submitted this 8th day of October 2004.


Ana B. Biocini, pro se

CERTIFICATE OF SERVICE

A true and correct copy of the foregoing has been sent this 8th day of October 2004 by placing the same in the United States Mail, first class postage prepaid and addressed to:

Barbara Brennan Silano
Assistant United States Attorney
Organized Crime Strike Force
11th Floor, Federal Building
450 Golden Gate Avenue, Box 36055
San Francisco, CA 94102


Ana B. Biocini

AR 989-1003 have
been deleted.

For AR 989-91 see AR 395-97

For AR 992-95 see AR 355-58

For AR 996 see AR 380

For AR 997 see AR 336

For AR 998 see AR 360

For AR 999-1002 see AR 363-65

For AR 1003 see AR 893

Department of Justice
Enforcement Administration

2-141121

REPORT OF INVESTIGATION

Page 1 of 1

1. PROGRAM CODE	2. CROSS FILE	RELATED FILES	3. FILE NO.	4. IDENTIFIER
BY: Ana Stanton AT: Special Agent San Francisco FD Group I	<input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/> <input type="checkbox"/>			
7. <input type="checkbox"/> Closed <input type="checkbox"/> Requested Action Completed <input type="checkbox"/> Action Pending			6. FILE TITLE	
8. OTHER OFFICERS:			9. DATE PREPARED	
S/A's William de Freitas, Bill Sicord, Sandra Tharp (DEA), Richard Carl (IRS/CID), Raul Guerra (MONTF), Susan Alford, and Craig Walker (FBI).			May 8, 1995	

10. REPORT RE:

Service of Federal Search Warrant at 54 Marin Ave., Sausalito, CA, and the Arrest of Ana BIOCINI (aka JARAMILLO)

DETAILS:

- On May 8, 1995 at 7:05 a.m., a federal search warrant was executed at 54 Marin Ave., Sausalito, CA. At the time of the execution the following persons were present within the residence:
 - Ana Beatriz BIOCINI
 - Peter BIOCINI (son)
- Ana BIOCINI was arrested pursuant to a warrant for violations of Title 21, as further listed in the indictment of Keith KARPINSKI, et al.
- DEA was responsible for seizing and processing controlled substances that met the requirements for a Class J violator or greater. Pursuant to the execution of the search warrant, no drug exhibits were seized by DEA.
- Ana BIOCINI was transported to the San Francisco FBI office by S/A's Ana Stanton and Bill Sicord, and was processed pursuant to her arrest.
- The residence was secured at approximately 7:10 a.m., and an inventory of all exhibits was left at the residence. (Refer to FBI report by S/A Susan Alford regarding the seizure of all non-drug evidence.)

11. DISTRIBUTION	12. SIGNATURE (Agent)	13. DATE
REGION	<i>Ana Stanton</i>	5-8-95
DISTRICT	14. APPROVED (Name and Title)	15. DATE
OTHER	<i>[Signature]</i> Walter S. Young, Group Supervisor	7/7/95

DEA Form 19
May 1989

DEA ENFORCEMENT
DRUG ENFORCEMENT ADMINISTRATION

This report is the property of the Drug Enforcement Administration.
It is not to be removed, altered, or destroyed without the approval of the agency to which it was issued.
Previous copies may be used.

037125

001004

IMPORTANT: Please read attached instructions before filling out application. Use typewriter or print in block letters with ballpoint pen. Be sure this information and the attached Form I-554A and instructions are filled out and use together. Do not leave any questions unanswered. After stamp is placed on the application, if you need more information, ask the nearest U.S. Consulate or the nearest U.S. Embassy. If you need more information, ask the nearest U.S. Consulate or the nearest U.S. Embassy. If you need more information, ask the nearest U.S. Consulate or the nearest U.S. Embassy.

UNITED STATES DEPARTMENT OF JUSTICE
IMMIGRATION AND NATURALIZATION SERVICE

READ INSTRUCTIONS CAREFULLY
FEE WILL NOT BE REFUNDED.

Form approved
OMB 15-R0068

APPLICATION TO EXTEND
TIME OF TEMPORARY STAY

I HEREBY APPLY TO EXTEND MY
TEMPORARY STAY IN THE UNITED STATES

PRESS FIRMLY. LEGIBLE COPY REQUIRED. PRINT OR TYPE YOUR NAME EXACTLY AS IT APPEARS ON YOUR ARRIVAL-DEPARTURE RECORD FORM I-94. IF YOUR MAILING ADDRESS IN THE U.S. IS WITH SOMEONE WHOSE FAMILY NAME IS DIFFERENT FROM YOURS, INSERT THAT PERSON'S NAME IN THE CIO BLOCK.

1. NAME (Last, first, middle initial)
JARAMILLO ANA BEATRIZ

2. DATE TO WHICH EXTENSION IS REQUESTED
01-15-82

3. REASON FOR REQUESTING EXTENSION
To visit other cities in the west of the U.S.

4. NAME OF PERSON TO WHOM YOU ARE COMING TO THE U.S.
To see some of my family and tourists.

5. HAVE YOU EVER BEEN IN THE U.S. ON A TEMPORARY BASIS?
YES ☒ NO ☐

6. HAVE YOU EVER BEEN IN THE U.S. ON A TEMPORARY BASIS?
YES ☒ NO ☐

7. INTEND TO DEPART THE U.S. BY (DATE)
7-15-81

8. PASSPORT NO.
T009523

9. DATE OF BIRTH
June 30 1954

10. DATE OF LAST ENTRY
Feb 11, 1981

11. NAME OF PERSON TO WHOM YOU ARE COMING TO THE U.S.
Avianca # 064

12. NAME OF PERSON TO WHOM YOU ARE COMING TO THE U.S.
Avianca # 064

13. NAME OF PERSON TO WHOM YOU ARE COMING TO THE U.S.
Avianca # 064

14. NAME OF PERSON TO WHOM YOU ARE COMING TO THE U.S.
Avianca # 064

15. NAME OF PERSON TO WHOM YOU ARE COMING TO THE U.S.
Avianca # 064

16. NAME OF PERSON TO WHOM YOU ARE COMING TO THE U.S.
Avianca # 064

17. NAME OF PERSON TO WHOM YOU ARE COMING TO THE U.S.
Avianca # 064

18. NAME OF PERSON TO WHOM YOU ARE COMING TO THE U.S.
Avianca # 064

19. NAME OF PERSON TO WHOM YOU ARE COMING TO THE U.S.
Avianca # 064

20. NAME OF PERSON TO WHOM YOU ARE COMING TO THE U.S.
Avianca # 064

21. NAME OF PERSON TO WHOM YOU ARE COMING TO THE U.S.
Avianca # 064

22. NAME OF PERSON TO WHOM YOU ARE COMING TO THE U.S.
Avianca # 064

23. NAME OF PERSON TO WHOM YOU ARE COMING TO THE U.S.
Avianca # 064

24. NAME OF PERSON TO WHOM YOU ARE COMING TO THE U.S.
Avianca # 064

25. NAME OF PERSON TO WHOM YOU ARE COMING TO THE U.S.
Avianca # 064

26. NAME OF PERSON TO WHOM YOU ARE COMING TO THE U.S.
Avianca # 064

27. NAME OF PERSON TO WHOM YOU ARE COMING TO THE U.S.
Avianca # 064

28. NAME OF PERSON TO WHOM YOU ARE COMING TO THE U.S.
Avianca # 064

29. NAME OF PERSON TO WHOM YOU ARE COMING TO THE U.S.
Avianca # 064

30. NAME OF PERSON TO WHOM YOU ARE COMING TO THE U.S.
Avianca # 064

31. NAME OF PERSON TO WHOM YOU ARE COMING TO THE U.S.
Avianca # 064

32. NAME OF PERSON TO WHOM YOU ARE COMING TO THE U.S.
Avianca # 064

33. NAME OF PERSON TO WHOM YOU ARE COMING TO THE U.S.
Avianca # 064

34. NAME OF PERSON TO WHOM YOU ARE COMING TO THE U.S.
Avianca # 064

35. NAME OF PERSON TO WHOM YOU ARE COMING TO THE U.S.
Avianca # 064

36. NAME OF PERSON TO WHOM YOU ARE COMING TO THE U.S.
Avianca # 064

37. NAME OF PERSON TO WHOM YOU ARE COMING TO THE U.S.
Avianca # 064

38. NAME OF PERSON TO WHOM YOU ARE COMING TO THE U.S.
Avianca # 064

39. NAME OF PERSON TO WHOM YOU ARE COMING TO THE U.S.
Avianca # 064

certify that the above is true and correct

SIGNATURE OF APPLICANT

SIGNATURE OF PERSON PREPARING FORM, IF OTHER THAN APPLICANT

I declare that this document was prepared by me at the request of the applicant and is based on all information on which I have any knowledge

SIGNATURE

ADDRESS

DATE

ATTACH YOUR FORM OR I-444 -- DO NOT SEND YOUR PASSPORT

RECEIVED

DATE

TIME

COMPLETED

RECEIVED

DATE

TIME

COMPLETED

RECEIVED

DATE

TIME

APPELLIDO(PATERNO) APPELLIDO(MATERNO) NOMBRE DE SOBRENOMBRE
JARAMILLO RACINES ANA BEATRIZ T-654
PAIS DEL QUE ES CIUDADANO PASAPORTE O DOCUMENTO DE REGISTRO DE EXTRANJERO
COLOMBIA T-009523 737 13 24
DOMICILIO EN LOS ESTADOS UNIDOS NUMERO, CALLE, CIUDAD Y ESTADO
HOTEL GUERRILLAS ATLANTA N.Y.
LINEA AEREA Y NO. DE VUELO O NAVIO EN QUE LLEGO PER PASAJERO SE ENBARCO EN
AVIANCA # 064 T-654 - COLOMBIA
NUMERO, CALLE, CIUDAD, PROVINCIA/ESTADO Y PAIS EN QUE SE ENBARCO CON CARACTER PERMANENTE
AVENIDA 5 A # 22N-40
MES, DIA Y AÑO DE NACIMIENTO
JUNIO 30/1954
CIUDAD, PROVINCIA/ESTADO Y PAIS DE NACIMIENTO
CALI - COLOMBIA
VISA EMITIDA EN/EN/NO TIENE VISA. AÑOTE EL NUMERO DEL PASAJERO
Enviado a Colombia.

B-2

16

DUBK3 540*23 *
PAGE 001 *

SENTENCE MONITORING
COMPUTATION DATA
AS OF 12-07-2004

* 12-07-2004
* 14:43:58

REGNO.: 93061-011 NAME: BIOCINI, ANA BEATRIZ

FBI NO.: 773905RA6
ARS1.: DUB/A-DES
UNIT.: D
DETAINERS.: NO

DATE OF BIRTH: 06-30-1954

QUARTERS.: D02-092L
NOTIFICATIONS: NO

PRE-RELEASE PREPARATION DATE: 01-19-2005

THE FOLLOWING SENTENCE DATA IS FOR THE INMATE'S CURRENT COMMITMENT.
THE INMATE IS PROJECTED FOR RELEASE: 03-02-2005 VIA 3621E CMPL

-----CURRENT JUDGMENT/WARRANT NO: 010 -----

COURT OF JURISDICTION.: CALIFORNIA, NORTHERN DISTRICT
DOCKET NUMBER.: CR-95-0187-01 CRB
JUDGE.: BREYER
DATE SENTENCED/PROBATION IMPOSED: 04-28-2003
DATE COMMITTED.: 01-16-2004
HOW COMMITTED.: US DISTRICT COURT COMMITMENT
PROBATION IMPOSED.: NO

	FELONY ASSESS	MISDMNR ASSESS	FINES	COSTS
NON-COMMITTED.:	\$100.00	\$00.00	\$00.00	\$00.00

RESTITUTION...: PROPERTY: NO SERVICES: NO AMOUNT: \$00.00

-----CURRENT OBLIGATION NO: 010 -----

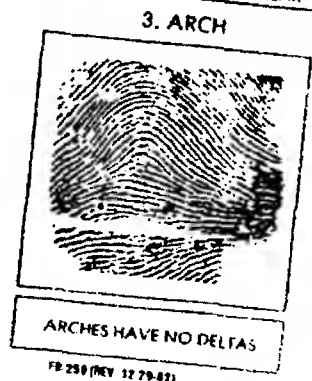
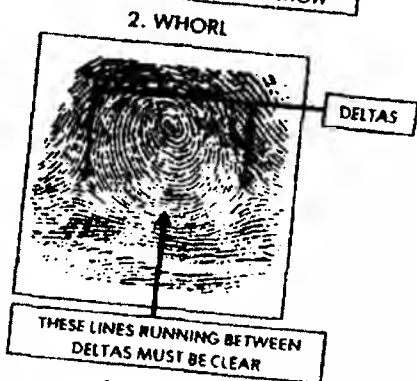
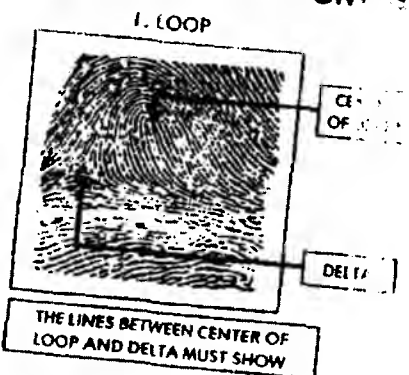
OFFENSE CODE.: 391
OFF/CHG: T 21 USC 846: CONSP TO DIST COCAINE.

SENTENCE PROCEDURE.: 3559 VCCLEA NON-VIOLENT SENTENCE
SENTENCE IMPOSED/TIME TO SERVE.: 30 MONTHS
TERM OF SUPERVISION.: 5 YEARS
DATE OF OFFENSE.: 05-08-1995

G0002

MORE PAGES TO FOLLOW . . .

UNITED STATES BUREAU OF INVESTIGATION
DEPARTMENT OF JUSTICE
WASHINGTON, D.C. 20537
APPLICANT



FB 250 (REV. 12-29-82)

THESE FINGERPRINTS ARE TO BE USED FOR IDENTIFICATION PURPOSES ONLY. THEY ARE NOT TO BE USED FOR ANY OTHER PURPOSE. THE FINGERPRINTS MUST BE TAKEN CAREFULLY AND SHOULD BE RECORDED IN CORRECT ORDER. IF THE FINGERPRINTS ARE DEFORMED OR OTHERWISE MADE IT IMPOSSIBLE TO PRINT A FINGER, MAKE A NOTATION TO THAT EFFECT. IF THE FINGERPRINTS ARE DEFORMED OR OTHERWISE MADE IT IMPOSSIBLE TO OBTAIN PERFECT IMPRESSIONS, SUBMIT THE BEST THAT CAN BE OBTAINED. IF A MEMO STAPLED TO THE CARD EXPLAINING THE CIRCUMSTANCES IS AVAILABLE, COMPLETE PRINTS TO SEE IF THEY CAN BE CLASSIFIED. BEARING IN MIND THAT MOST FINGERPRINTS ARE NOT SHOWN HERE.

- THIS CARD FOR USE BY:**
1. LAW ENFORCEMENT AGENCIES IN FINGERPRINTING APPLICATIONS FOR LAW ENFORCEMENT POSITIONS.
 2. OFFICIALS OF STATE AND LOCAL GOVERNMENTS FOR PURPOSES OF EMPLOYMENT LICENSING, AND PERMITS AS AUTHORIZED BY STATE STATUTES AND APPROVED BY THE ATTORNEY GENERAL OF THE UNITED STATES, LOCAL AND COUNTY ORDINANCES, UNLESS SPECIFICALLY BASED ON APPLICABLE STATE STATUTES DO NOT SATISFY THIS REQUIREMENT.
 3. U.S. GOVERNMENT AGENCIES AND OTHER ENTITIES REQUIRED BY FEDERAL LAW.
 4. OFFICIALS OF FEDERALLY CHARTERED OR INSURED BANKING INSTITUTIONS TO PROMOTE OR MAINTAIN THE SECURITY OF THOSE INSTITUTIONS.

LEAVE THIS SPACE BLANK

- INSTRUCTIONS:**
1. PRINTS MUST FIRST BE CHECKED THROUGH THE APPROPRIATE STATE IDENTIFICATION BUREAU, AND ONLY THOSE FINGERPRINTS FOR WHICH NO DISQUALIFYING RECORD HAS BEEN FOUND LOCALLY SHOULD BE SUBMITTED FOR FBI SEARCH.
 2. PRIVACY ACT OF 1974 (P.L. 93-596) REQUIRES THAT FEDERAL, STATE, OR LOCAL AGENCIES INFORM INDIVIDUALS WHOSE SOCIAL SECURITY NUMBER IS REQUESTED WHETHER SUCH DISCLOSURE IS MANDATORY OR VOLUNTARY, BASIS OF AUTHORITY FOR SUCH SOLICITATION, AND USES WHICH WILL BE MADE OF IT.
 3. IDENTITY OF PRIVATE CONTRACTORS SHOULD BE SHOWN IN SPACE "EMPLOYER AND ADDRESS". THE CONTRIBUTOR IS THE NAME OF THE AGENCY SUBMITTING THE FINGERPRINT CARD TO THE FBI.
 4. FBI NUMBER, IF KNOWN, SHOULD ALWAYS BE FURNISHED IN THE APPROPRIATE SPACE.
- MISCELLANEOUS (NO RECORD, OTHER ARMED FORCES NO., PASSPORT NO. (PP), ALIEN REGISTRATION NO. (AR), PORT SECURITY CARD NO. (PS), SELECTIVE SERVICE NO. (SS), VETERANS ADMINISTRATION CLAIM NO. (VA).

U.S. GOVERNMENT PRINTING OFFICE: 1987-1-13-228

APPLICANT

SIGNATURE OF PERSON FINGERPRINTED:
Xu Buata Jacinto
 RESIDENT'S OR PERSON FINGERPRINTED:
 520 BRICKELL KEY DR.
 MIAMI, FL 33131
 DATE: *1/20/08* SIGNATURE OF OFFICIAL TAKING FINGERPRINTS:
 EMPLOYER'S ADDRESS:

LAST NAME: *Jacinto* FIRST NAME: *Buata*
 AKA'S: *None* RPFZ: *None*
 PS: *None*
 FAS: *None*

DATE OF BIRTH: *06/30/54*
 SEX: *M*
 PLACE OF BIRTH: *COLOMBIA*

CITIZENSHIP: *COLOMBIAN* F: *None* M: *None* SS: *None* US: *None*
 YOUR NO: *None* LEAF # BLANK

REASON FINGERPRINTED:
Legalization



73

93061-011

1 ROBERT WAGGENER - SBN: 118450
2 Law Office of Robert Waggener
214 Duboce Avenue
3 San Francisco, California 94103
(415) 431-4500
4 Attorney for Defendant ANA BIOCINI

FILED

NOV 20 2003

RICHARD W. WIEKING
CLERK U.S. DISTRICT COURT,
NORTHERN DISTRICT OF CALIFORNIA

UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA

11 UNITED STATES OF AMERICA

No. CR 95 00187 CRB

12 Plaintiff,

**[REDACTED] ORDER EXTENDING
SELF-SURRENDER DATE**

13 v.

14 ANA BIOCINI,

15 Defendant.

17 **GOOD CAUSE APPEARING THEREFOR,**

18 **IT IS HEREBY ORDERED** that the current date of self-surrender, November 25, 2003,
19 for the defendant Ana Biocini be extended to January 16, 2004

21 Dated: Nov. 20, 2003

22 **CHARLES R. BREYER**
United States District Judge

RECEIVED
UNITED STATES DISTRICT COURT
NORTHERN DISTRICT OF CALIFORNIA
SAN FRANCISCO
NOV 21 2003

C:\Data\FD\Order for Extension of Surrender Date3.ab.wpd